## STATEMENT OF **ORGANIZATION**

03 APR 30 PH 2: 13

- CHIVI I					Office Use Only
NAME OF COMMITTEE (in ful	(Check if just is change		nple:If typing, type the lines.	12FE4M	5
BOB SCHA	FFER FOR	NS SEA	ATE	<u> </u>	
			1111	1111	
ADDRESS (number and s	treet) PO BOX	110213	3.5		
(Check if addre	ss LIIII	1111		1 1 1 1	
្នែរ is changed)	DENVE	2_		LO	80250
COMMITTEE'S E-MAIL .	ADDRESS	CITY		STATE	ZIP CODE
ikaranger Obobschafter torsenate. com					
COMMITTEE'S WEB PAGE ADDRESS (URL)					
www.bobschaffekforksenater.com					
			1 1 1 1 1 1 1	t t 1 1 1	
COMMITTEE EAV AUG	· mcD				
COMMITTEE'S FAX NUMBER  [3,03-501-1,365]					
	s	acres			
2. DATE 04	25 200 B	<b>Š</b>			
3. FEC IDENTIFICATION NUMBER C 00434985					
4. IS THIS STATEMEN	IT [] NEW (N)	OR 💢	AMENDED (A)		
I certify that I have exam	niñed this Statement and t	to the best of my k	nowledge and belief	it is true, correc	ct and complete.
Type or Print Name of T	er Sayak	K. 6	aya mex		
Type of Trancivanie of T	0	//		(-g*	
Signature of Treasurer	Syl			Date 🙋	4 25 2008
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.					
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 12/2007)